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PTO/SB/21 (05-03)

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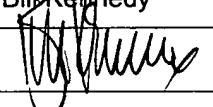
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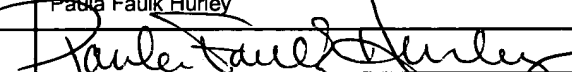
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/084,787	
	Filing Date	02/25/02	
	First Named Inventor	Rajendra Pense	
	Art Unit	2826	
	Examiner Name	Alexander O. Williams	
Total Number of Pages in This Submission	15	Attorney Docket Number	CPAC 1010-2

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form and duplicate <input checked="" type="checkbox"/> Fee Attached <u>Check # 2492</u> <input checked="" type="checkbox"/> Amendment/Reply (8 pp.) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement and Form PTO/SB/08A (3 pp.) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (1 p.) (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below): 1 cited reference
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 50-0869.

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Haynes Beffel & Wolfeld LLP Bill Kennedy Reg. No. 33,407
Signature	 Reg. No. 33,407
Date	11 September 2003

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. on the date shown below.			
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FEE TRANSMITTAL

for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 500

Application Number 10/084,787

Filing Date 02/25/02

First Named Inventor Pendse

Examiner Name Alexander O. Williams

Art Unit 2826

Attorney Docket No. CPAC 1010-2

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TC 1700

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ MoneyOrder ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number

50-0869

Deposit Account Name

Haynes Beffel & Wolfeld LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	750	Utility filing fee	
		1002	330	Design filing fee	
		1003	520	Plant filing fee	
		1004	750	Reissue filing fee	
		1005	160	Provisional filing fee	

SUBTOTAL (1)

(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fees from below	Fee Paid
-20** = 0	X \$18		\$0
Independent Claims -3** = 0	X \$84		\$0
Multiple Dependent	X		

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
		1202	18	Claims in excess of 20
		1201	84	Independent claims in excess of 3
		1203	280	Multiple dependent claim, if not paid
		1204	84	** Reissue independent claims over original patent
		1205	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large	Entity	Small	Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65			Surcharge - late filing fee or oath	
1052	50	2052	25			Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130			Non-English specification	
1812	2,520	1812	2,520			For filing a request for reexamination	
1804	920*	1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*			Requesting publication of SIR after Examiner action	
1251	110	2251	55			Extension for reply within first month	
1252	410	2252	205			Extension for reply within second month	
1253	930	2253	465			Extension for reply within third month	
1254	1,450	2254	725			Extension for reply within fourth month	
1255	1,970	2255	985			Extension for reply within fifth month	
1401	320	2401	160			Notice of Appeal	
1402	320	2402	160			Filing a brief in support of an appeal	
1403	280	2403	140			Request for oral hearing	
1451	1,510	1451	1,510			Petition to institute a public use proceeding	
1452	110	2452	55			Petition to revive - unavoidable	
1453	1,300	2453	650			Petition to revive - unintentional	
1501	1,300	2501	650			Utility issue fee (or reissue)	
1502	470	2502	235			Design issue fee	
1503	630	2503	315			Plant issue fee	
1460	130	1460	130			Petitions to the Commissioner	
1807	50	1807	50			Petitions related to provisional applications	
1806	180	1806	180			Submission of Information Disclosure Stmt	180
8021	40	8021	40			Recording each patent assignment per property (times number of properties)	
1809	750	2809	375			Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375			For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375			Request for Continued Examination (RCE)	
1802	900	1802	900			Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid SUBTOTAL (3)

(\$) 500

SUBMITTED BY

Name (Print/Type)

Bill Kennedy

Registration No. (Attorney/Agent)

33,407

Telephone

650-712-0340

Signature

Date

11 September 2003

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